1357028



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

# FORM D

## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

| OMB APPR          | OVAL      |
|-------------------|-----------|
| OMB Number:       | 3235-0076 |
| Expires:          |           |
| Estimated averag  | e burden  |
| hours per respons | se16.00   |

| SEC USE  | ONLY   |
|----------|--------|
| Prefix   | Serial |
|          |        |
| DATE REC | DEIVED |
|          | 1      |

| Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  |   |
|---|---|
| Montgomery Equity Partners U.S., LP Limited Partnership Interest Offering Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)  | ULOE  |
| Type of Filing: New Filing Amendment  |   |
|   |   |
| A. BASIC IDENTIFICATION DATA  |   |
| I. Enter the information requested about the issuer   | 06027444  |
| Name of Issuer (  check if this is an amendment and name has changed, and indicate change.)   | 00021   |
| Montgomery Equity Partners U.S., LP   |   |
| Address of Executive Offices (Number and Street, City, State, Zip Code)   | Telephone Number (Including Area Code)  |
|   | 1-985-8300  |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)   | Telephone Number (Including Area Code)  |
| Brief Description of Business   |   |
| Investment fund providing financing for micro-cap and small-cap publicly traded companies and   | d private companies.  |
| Type of Business Organization  corporation business trust  I limited partnership, already formed business trust  limited partnership, to be formed  | se specify): CLAR 2 4 2003  |
| Month Year  Actual or Estimated Date of Incorporation or Organization: 0 9 0 4 Actual Estimate  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction)   | THOMSON /S<br>FINANCIAL /S  |
| GENERAL INSTRUCTIONS  |   |
| Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Securities.  | ection 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.  |
| When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below which it is due, on the date it was mailed by United States registered or certified mail to that address.  |   |
| Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549  | ).  |
| Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed copy or bear typed or printed signatures.  | igned. Any copies not manually signed must be   |
| Information Required: A new filing must contain all information requested. Amendments need only report the thereto, the information requested in Part C, and any material changes from the information previously supplied not be filed with the SEC.   |   |
| Filing Fee: There is no federal filing fee.   |   |
| State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Secu are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The this notice and must be completed. | urities Administrator in each state where sales e exemption, a fee in the proper amount shall |
| ATTENTION   |   |
| Failure to file notice in the appropriate states will not result in a loss of the federal exem appropriate federal notice will not result in a loss of an available state exemption unless filing of a federal notice.  |   |

#### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Yorkville Advisors, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 101 Hudson Street, Suite 3700, Jersey City, NJ 07302 Check Box(es) that Apply: Beneficial Owner Executive Officer Promoter General and/or Director Managing Partner Full Name (Last name first, if individual) Angelo, Mark (President, Yorkville Advisors, LLC) Business or Residence Address (Number and Street, City, State, Zip Code) c/o Yorkville Advisors, LLC, 101 Hudson Street, Suite 3700, Jersey City, NJ 07302 Director Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Beckman, Matthew J. (Head Trader, Yorkville Advisors, LLC) Business or Residence Address (Number and Street, City, State, Zip Code) c/o Yorkville Advisors, LLC, 101 Hudson Street, Suite 3700, Jersey City, NJ 07302 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Jerry Eicke (Managing Partner, Yorkville Advisors, LLC) Business or Residence Address (Number and Street, City, State, Zip Code) c/o Yorkville Advisors, LLC, 101 Hudson Street, Suite 3700, Jersey City, NJ 07302 Beneficial Owner Check Box(es) that Apply: Executive Officer General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Gonzalez, David (General Counsel and Managing Partner, Yorkville Advisors, LLC) Business or Residence Address (Number and Street, City, State, Zip Code) c/o Yorkville Advisors, LLC, 101 Hudson Street, Suite 3700, Jersey City, NJ 07302 Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Beneficial Owner Executive Officer Check Box(es) that Apply: ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

|     |   |                       |                      |                      | B. II                | FORMAT               | ION ABOU             | T OFFERI             | NG                                      |   |   |                      |                |
|-----|---|-----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|---|---|---|----------------------|----------------|
| 1   | Uaa tha   | inguar gal            | d or door th         | a laguar le          | stand to as          | 11 to non o          | aamaditad i          |                      | thin offeri                             | <u>-</u>                                |   | Yes                  | No             |
| 1.  | . Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?   |                       |                      |                      |                      |                      | X                    |                      |   |   |   |                      |                |
| 2.  |   |                       |                      |                      |                      |                      |                      |                      | \$ 250,000.00                           |   |   |                      |                |
|     | what is the minimum investment that will be accepted from any individual?   |                       |                      |                      |                      |                      |                      |                      | Yes                                     | No                                      |   |                      |                |
| 3.  | Does th   | e offering            | permit joint         | ownershi             | p of a sing          | le unit?             | •••••                | ••••••               | •••••                                   | ••••                                    |   | X                    |                |
| 4.  | 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. |                       |                      |                      |                      |                      |                      |                      |   |   |   |                      |                |
|     | •   | Last name<br>Attachme | first, if indi       | vidual)              |                      |                      |                      |                      |   |   |   |                      |                |
|     |   |                       | Address (N           | umber and            | l Street, Ci         | ty, State, Z         | (ip Code)            |                      |   |   |   |                      |                |
|     |   |                       |                      |                      |                      |                      |                      |                      |   |   |   |                      |                |
| Na  | me of As  | sociated Br           | oker or Dea          | aler                 |                      |                      |                      |                      |   |   |   |                      |                |
| Sta | ites in Wi  | nich Person           | Listed Has           | Solicited            | or Intends           | to Solicit           | Purchasers           |                      |   |   |   |                      |                |
|     | (Check  | "All States           | s" or check          | individual           | States)              | •••••                |                      | ••••••               | ·····                                   |   |   | ☐ Al                 | l States       |
|     | [AL]  | AK                    | AZ                   | AR                   | CA                   | CO                   | CT                   | DE                   | DC                                      | FL                                      | GA                                      | HI                   | ĪD             |
|     | IL<br>MT<br>RI  | IN NE                 | IA<br>NV<br>SD       | KS<br>NH<br>TN       | KY<br>NJ<br>TX       | LA<br>NM<br>UT       | ME<br>NY<br>VT       | MD<br>NC<br>VA       | MA<br>ND<br>WA                          | MI<br>OH<br>WV                          | MN<br>OK<br>WI                          | MS<br>OR<br>WY       | MO<br>PA<br>PR |
| Ful | II Name (   | Last name             | first, if indi       | vidual)              |                      |                      |                      |                      |   |   |   |                      |                |
| Bu  | siness or   | Residence             | : Address (N         | Number an            | d Street, C          | ity, State, 2        | Zip Code)            |                      |   | ····                                    |   | ·                    |                |
| Na  | me of As  | sociated Br           | roker or De          | aler                 |                      |                      |                      |                      |   |   |   |                      |                |
| Sta |   |                       | Listed Has           |                      |                      |                      |                      |                      |   |   |   |                      |                |
|     | (Check  | "All State:           | s" or check          | individual           | States)              |                      | ****************     | .****                | ······································  | ••••••••                                | *************************************** | ☐ Al                 | l States       |
|     | AL<br>IL<br>MT<br>RI  | AK<br>IN<br>NE<br>SC  | IA<br>NV<br>SD       | AR<br>KS<br>NH<br>TN | CA<br>KY<br>NJ<br>TX | CO<br>LA<br>NM<br>UT | ME<br>NY<br>VT       | DE<br>MD<br>NC<br>VA | DC<br>MA<br>ND<br>WA                    | FL<br>MI<br>OH<br>WV                    | GA<br>MN<br>OK<br>WI                    | MS<br>OR<br>WY       | MO<br>PA<br>PR |
| Fu! | ll Name (   | Last name             | first, if indi       | ividual)             |                      |                      |                      |                      |   |   |   |                      |                |
| Bu  | siness or   | Residence             | Address (1           | Number an            | d Street, C          | ity, State, 2        | Zip Code)            |                      |   |   |   |                      |                |
| Na  | me of As  | sociated B            | roker or De          | aler                 |                      |                      |                      |                      |   |   | <del></del>                             |                      | <u></u>        |
| Sta | ites in W   | nich Person           | Listed Has           | Solicited            | or Intends           | to Solicit           | Purchasers           |                      |   |   | · · · · · · · · · · · · · · · · · · ·   |                      |                |
|     | (Check  | "All State            | s" or check          | individual           | States)              | **************       | ,                    |                      | *************************************** | *************************************** |   | ☐ Al                 | 1 States       |
|     | AL<br>IL<br>MT<br>RI  | AK<br>IN<br>NE<br>SC  | AZ<br>IA<br>NV<br>SD | AR<br>KS<br>NH<br>TN | CA<br>KY<br>NJ<br>TX | CO<br>LA<br>NM<br>UT | CT<br>ME<br>NY<br>VT | DE<br>MD<br>NC<br>VA | DC<br>MA<br>ND<br>WA                    | FL<br>MI<br>OH<br>WV                    | GA<br>MN<br>OK<br>WI                    | HI<br>MS<br>OR<br>WY | MO<br>PA<br>PR |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.  |                             |                            |
|----|--|-----------------------------|----------------------------|
|    | Type of Security   | Aggregate<br>Offering Price | Amount Already<br>Sold     |
|    | Debt   | \$                          | \$                         |
|    | Equity   |                             |                            |
|    | ☐ Common ☐ Preferred   |                             |                            |
|    | Convertible Securities (including warrants)  | \$                          | \$                         |
|    | Partnership InterestsPlease see Attachment A.  |                             | \$ 9,506,405.00            |
|    | Other (Specify)  |                             |                            |
|    | Total  |                             |                            |
|    | Answer also in Appendix, Column 3, if filing under ULOE.   |                             |                            |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."             |                             | Aggregate                  |
|    |  | Number<br>Investors         | Dollar Amount of Purchases |
|    | Accredited Investors   | 0                           | \$ 9,506,405.00            |
|    | Non-accredited Investors   | 0                           | \$_0.00                    |
|    | Total (for filings under Rule 504 only)  |                             | \$                         |
|    | Answer also in Appendix, Column 4, if filing under ULOE.   |                             |                            |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.   |                             |                            |
|    | Type of Offering   | Type of<br>Security         | Dollar Amount<br>Sold      |
|    | Rule 505   |                             | \$                         |
|    | Regulation A   |                             | \$                         |
|    | Rule 504   |                             | \$                         |
|    | Total  |                             | \$_0.00                    |
| 4  | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. |                             |                            |
|    | Transfer Agent's Fees  |                             | \$                         |
|    | Printing and Engraving Costs   |                             | \$ 10,000.00               |
|    | Legal Fees   | Z                           | \$ 75,000.00               |
|    | Accounting Fees  |                             | \$                         |
|    | Engineering Fees   |                             | \$                         |
|    | Sales Commissions (specify finders' fees separately)   |                             | \$                         |
|    | Other Expenses (identify) mailing  |                             | \$ 1,000.00                |
|    | Total  | _                           | \$_86,000.00               |

|     | and total expenses furnished in response to Part C —<br>proceeds to the issuer?  | \$ <u>199,914.0</u> 0  | \$ <u>199,914,0</u> 00.00  |  |          |
|-----|--|--|--|--|----------|
| 5.  | Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part  | nate and   |  |  |          |
|     |  | v. in the second of the secon  | Payments to<br>Officers,<br>Directors, &<br>Affiliates   | Payments to.<br>Others                 | <b>₫</b> |
|     | Salaries and fees  |  |  | <del></del>                            |          |
|     | Purchase of real estate  |  |  | _                                      |          |
|     | Purchase, rental or leasing and installation of mac  | hincry   | <b>7</b>   | <b>:</b>                               |          |
|     | Construction or leasing of plant buildings and fac   |  |  |  |          |
|     | Acquisition of other businesses (including the val<br>offering that may be used in exchange for the asse<br>issuer pursuant to a merger)   | ue of securities involved in this  | Think you don't would be   | ·(名··································· |          |
|     | Repayment of indebtedness  | eterrene and and experience and the properties of the experience o | ······································   | TO                                     |          |
|     | Working capital  |  |  |  |          |
|     | Other (specify): investment procee   |  |  |  |          |
|     | incentive allocation, opera  |  | 10 July 10 Jul | -                                      |          |
|     | News of the part of the contract of the contra | man district and the superior of the contract of the   |  |  |          |
|     | Columb Totals  |  |  |  |          |
|     | Total Payments Listed (column totals added)  |  |  | )                                      |          |
| 128 |  | Dafederal signature  |  |  | ٠        |
| igi | issue) has duly caused this notice to be signed by the<br>ature constitutes an undertaking by the issuer to fur  | undersigned duly authorized person. If the   | Commission, upon write   |  |          |
|     | nformation furnished by the Issuer to any non-acci   |  | trakota  |  |          |
|     | er (Print or Type)  gomery Equity Partners, U.S.,  | Signature X  | 3/3/06   | •                                      |          |
|     | te of Signer (Print or Type) LP  | Title of Signer (Print or Type)  | - I /  | ing satisfied in more supplied.        |          |
|     | Mark Angelo  | Portfolio Manager, York  | ville Advisor  | s, LLC (Genera                         | al Pa    |

### Attachment A

### SEC Form D

### Montgomery Equity Partners U.S., LP

## **Limited Partnership Interest Offering**

### Item B; Question 4

No one is directly paid or given any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. Yorkville Advisors, LLC (the "Investment Manager"), receives a management fee in consideration of its acting as Investment Manager for Montgomery Equity Partners U.S., LP, which is used to pay the overhead expenses and fees of the Investment Manager. The Investment Manager's employees solicit investors as part of their job duties and are not paid specifically for raising capital; however, a portion of such employees' time is spent raising capital. These employees perform substantial other duties for the Investment Manager.

### Item C, Question 1

There is no maximum aggregate amount of partnership interests offered in the offering. However, The Issuer anticipates selling up to \$200,000,000 worth of partnership interests in the offering.